

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
LEE PAC

ADDRESS (number and street) **47 FLINTLOCK DRIVE**
Check if different than previously reported. (ACC) **SHIRLEY NY 11967**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00573626 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on **11 / 03 / 2020** in the State of **NY**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **10 / 01 / 2020** through **10 / 14 / 2020**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Marks, Nancy, , ,
Type or Print Name of Treasurer _____

Signature of Treasurer Marks, Nancy, , , [Electronically Filed] Date **10 / 22 / 2020**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

LEE PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="39398.94"/>	<input type="text" value="39398.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="70002.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="32600.00"/>	<input type="text" value="199221.60"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="102602.37"/>	<input type="text" value="238620.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2242.15"/>	<input type="text" value="138260.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="100360.22"/>	<input type="text" value="100360.22"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

LEE PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8500.00	58800.00
(ii) Unitemized	0.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8500.00	58810.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	45700.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	18500.00	104510.00
12. Transfers From Affiliated/Other Party Committees.....	14100.00	91711.60
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	32600.00	199221.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	32600.00	199221.60

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	242.15	20060.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	242.15	20060.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	118200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2242.15	138260.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2242.15	138260.32

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18500.00	104510.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18500.00	104510.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	242.15	20060.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	242.15	20060.32

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LEE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Loeb, Daniel, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2020
Mailing Address 15 Central Park West, PH 39			Transaction ID : SA11AI.5655
City New York	State NY	Zip Code 10023	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Third Point Management LLC		Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mack, David, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2020
Mailing Address 2115 Linwood Ave			Transaction ID : SA11AI.5646
City Fort Lee	State NJ	Zip Code 07024	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Mack Industries		Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Topper, Lewis, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2020
Mailing Address 212 Treasure Place			Transaction ID : SA11AI.5647
City Jupiter	State FL	Zip Code 33469	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	8500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LEE PAC

A. ALLY FINANCIAL INC. ADVOCACY POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 801 PENNSYLVANIA AVE., N.W
 SUITE 415
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00579540
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11C.5678
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. AMERICAN BANKERS ASSOCIATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 CONNECTICUT AVE NW
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C90017583
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11C.5676
 Amount of Each Receipt this Period 5000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LEE PAC

A. ZELDIN 2020
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00573683

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		14		2020

Transaction ID : SA12.5659

Amount of Each Receipt this Period
5000.00

Memo Item transfer

B. Pius, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 794 Ft Salonga Road

City Northport	State NY	Zip Code 11768
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Home Maker Home Maker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		14		2020

Transaction ID : SA12.5659.0

Amount of Each Receipt this Period
5000.00

Memo Item

C. ZELDIN VICTORY COMMITTEE 2020
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00579920

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
81711.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		14		2020

Transaction ID : SA12.5662

Amount of Each Receipt this Period
9100.00

Memo Item Transfer

SUBTOTAL of Receipts This Page (optional).....	14100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LEE PAC

A. D'Amato, Armand, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Charles Lindbergh Blvd

City Uniondale	State NY	Zip Code 11553
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Park Strategies	Occupation (for Individual) Partner
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2020

Transaction ID : SA12.5662.0

Amount of Each Receipt this Period
1000.00

Memo Item

B. Gershowitz, Kevin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 Old Bridge Court

City Melville	State NY	Zip Code 11747
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Gershow Recycling	Occupation (for Individual) Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2020

Transaction ID : SA12.5662.1

Amount of Each Receipt this Period
400.00

Memo Item

C. Gershowitz, Marnie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 Old Bridge Court

City Melville	State NY	Zip Code 11747
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Home Maker	Occupation (for Individual) Home Maker
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2020

Transaction ID : SA12.5662.2

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LEE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Gershowitz, Sam, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2020
Mailing Address 71 Peconic Avenue		Transaction ID : SA12.5662.3
City Medford	State NY	Zip Code 11763
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer (for Individual) Gershow Recycling	Occupation (for Individual) Owner	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Krieger, Steven, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2020
Mailing Address 300 Jericho Turnpike		Transaction ID : SA12.5662.4
City Jericho	State NY	Zip Code 11753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Developer	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pia, Christopher, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2020
Mailing Address 59 West 12th Street		Transaction ID : SA12.5662.5
City New York	State NY	Zip Code 10011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Self Employed	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	14100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LEE PAC

A. CAWTHORN FOR NC

Full Name (Last, First, Middle Initial)

Mailing Address 638 SPARTANBURG HWY, STE 70 #362

City HENDERSONVILLE State NC Zip Code 28792

Purpose of Disbursement Donation

Candidate Name **LEE PAC**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 01 / 2020

FEC Identification Number C C00573626

Transaction ID : SB23.5651

Amount of Each Disbursement this Period 1000.00

Memo Item

B. ROB WITTMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 427

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement Donation

Candidate Name **LEE PAC**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 06 / 2020

FEC Identification Number C C00573626

Transaction ID : SB23.5656

Amount of Each Disbursement this Period 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

2000.00

TOTAL This Period (last page this line number only)..... ▶

2000.00